

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000**

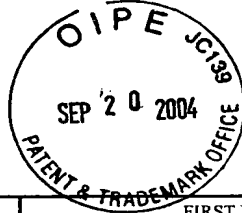
or **Fax**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

027765 7590 06/28/2004

**NAIPO (NORTH AMERICA INTERNATIONAL PATENT OFFICE)
P.O. BOX 506
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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/604,457	07/22/2003	Chien-Fong Kuo	ACMP0091USA	1456

TITLE OF INVENTION: PROJECTOR AND METHOD FOR ASSEMBLY THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/28/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BLACKMAN, ROCHELLE ANN J	2851	353-119000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Winston Hsu
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE BenQ Corporation (B) RESIDENCE: (CITY and STATE OR COUNTRY)
No. 157, Shan-Ying Road, Gueishan, Tao-Yuan Hsien 333, Taiwan, R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee
☒ Publication Fee
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3105 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Winston Hsu (Date) 9/16/2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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09/20/2004 SDIRETA2 00000083 503105 10604457
 01 FC:1501
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 1330.00 DA
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TRANSMIT THIS FORM WITH FEE(S)



PTO/SB/21 (08-03)
Approved for use through 08/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/604,457	
	Filing Date	07/22/2003	
	First Named Inventor	Chien-Fong Kuo	
	Art Unit	2851	
	Examiner Name	BLACKMAN, ROCHELLE ANN J	
Total Number of Pages in This Submission	3	Attorney Docket Number	ACMP0091USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Winston Hsu, Reg. No.: 41,526	
Signature	<i>Winston Hsu</i>	
Date	9/16/2004	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name			
Signature		Date	

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1630.00

Complete if Known

Application Number	10/604,457
Filing Date	07/22/2003
First Named Inventor	Chien-Fong Kuo
Examiner Name	BLACKMAN, ROCHELLE ANN J
Art Unit	2851
Attorney Docket No.	ACMP0091USA

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number
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50-3105

North America Intellectual Property Corp.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	
Independent Claims	-3** =	X	
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051 130		2051 65		Surcharge - late filing fee or oath	
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130		1053 130		Non-English specification	
1812 2,520		1812 2,520		For filing a request for <i>ex parte</i> reexamination	
1804 920*		1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*		1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110		2251 55		Extension for reply within first month	
1252 420		2252 210		Extension for reply within second month	
1253 950		2253 475		Extension for reply within third month	
1254 1,480		2254 740		Extension for reply within fourth month	
1255 2,010		2255 1,005		Extension for reply within fifth month	
1401 330		2401 165		Notice of Appeal	
1402 330		2402 165		Filing a brief in support of an appeal	
1403 290		2403 145		Request for oral hearing	
1451 1,510		1451 1,510		Petition to institute a public use proceeding	
1452 110		2452 55		Petition to revive - unavoidable	
1453 1,330		2453 665		Petition to revive - unintentional	
1501 1,330		2501 665		Utility issue fee (or reissue)	1630
1502 480		2502 240		Design issue fee	
1503 640		2503 320		Plant issue fee	
1460 130		1460 130		Petitions to the Commissioner	
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)	
1806 180		1806 180		Submission of Information Disclosure Stmt	
8021 40		8021 40		Recording each patent assignment per property (times number of properties)	
1809 770		2809 385		Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770		2810 385		For each additional invention to be examined (37 CFR 1.129(b))	
1801 770		2801 385		Request for Continued Examination (RCE)	
1802 900		1802 900		Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 1630.00

SUBMITTED BY

(Complete (if applicable))

Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent)	41,526	Telephone	886289237350
Signature	<i>Winston Hsu</i>	Date	9/16/2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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